

## HOUSE BILL NO. 619

INTRODUCED BY R. HAMILTON

A BILL FOR AN ACT ENTITLED: "AN ACT CONCERNING DISCLOSURE OF UNDERWRITING INFORMATION BY CERTAIN ORGANIZATIONS TO CERTAIN ENTITIES REQUESTING THAT INFORMATION; ADDING CERTAIN ASSOCIATIONS TO THOSE ENTITIES REQUIRED TO MAKE DISCLOSURE; ADDING SUMMARY HEALTH CARE INFORMATION TO THE TYPES OF UNDERWRITING INFORMATION THAT MUST BE DISCLOSED; ADDING A MEMBER OF AN ASSOCIATION TO THE ENTITIES THAT MAY REQUEST AND RECEIVE THE UNDERWRITING INFORMATION; LOWERING FROM 50 TO 10 THE MAXIMUM NUMBER OF EMPLOYEES THAT A BUSINESS MAY EMPLOY FOR THE PURPOSES OF AN EXCEPTION FROM THOSE ENTITIES THAT MAY REQUEST UNDERWRITING INFORMATION; INCREASING FROM ONCE A YEAR TO TWICE A YEAR THE NUMBER OF TIMES AN ENTITY MAY REQUEST DISCLOSURE OF UNDERWRITING INFORMATION; AND AMENDING SECTION 33-19-308, MCA."

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MONTANA:

**Section 1.** Section 33-19-308, MCA, is amended to read:

**"33-19-308. Disclosure of underwriting information.** (1) An insurance institution, an association described in subsection (2)(a), or an insurance-support organization shall, within 30 days of receiving a written request from an entity listed in subsection (2) that it provides coverage for, disclose to that entity the following information that the entity specifically requests about the entity's coverage:

(a) total premiums collected from the entity for the policy year; ~~and~~

(b) total losses paid out with respect to the entity for the policy year; and

(c) sufficient summary health information to enable the entity to use the information to obtain a premium bid or quote for group health insurance coverage from another insurer or insurance producer and for the purpose of underwriting, premium rating, or another activity related to the creation, renewal, or replacement of a contract of health insurance or health benefits. As used in this subsection, "summary health information" has the meaning provided in 45 CFR 164.504.

(2) Any of the following entities may request information about the entity's coverage pursuant to this section:

1 (a) an association having a group health insurance program for its members or a member of that  
2 association if that association has more than 10 employees participating in the group health insurance program;

3 (b) a group purchasing cooperative;

4 (c) a group health plan that is a multiple employer welfare arrangement;

5 (d) a self-insured group; and

6 (e) a business that provides group health insurance for its employees, except that a business with  
7 between 2 and ~~50~~ 10 employees is not subject to the provisions of this section.

8 (3) Information disclosed or used pursuant to this section may not include any personal information  
9 pertaining to an individual covered by a group plan that has been obtained or administered by an entity listed  
10 in subsection (2).

11 (4) Information that is obtainable pursuant to the provisions of this section may not be requested more  
12 than ~~once~~ twice during any calendar year.

13 (5) An association provided for in subsection (2)(a) must be provided with reasonable information by  
14 its insurance institution or insurance support organization to enable the association to receive a bid or quote for  
15 coverage from other insurance entities."

16 - END -